



County of San Bernardino

F A S

STANDARD CONTRACT

AMENDMENT NO. 4

FOR COUNTY USE ONLY

E	New	Vendor Code		Dept.	Contract Number	
M	<input checked="" type="checkbox"/> Change	SC		707	A	
X	Cancel					
County Department				Dept.	Orgn.	Contractor's License No.
San Bernardino Int'l Airport Authority						
County Department Contract Representative				Phone #		Amount of Contract
Penny Chua				382-4100, x243		\$30,905.00
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB Number	Termination Date
NKL	ACT	420	100	1010	SCANU	
Commodity Code			Estimated Payment Total by Fiscal Year			
			FY	Amount	I/D	
Project Name						

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino, hereinafter called the County, and

Name

Robert Scanu

hereinafter called Contractor

Address

ON FILE

Phone

Birth Date

Federal ID No. or Social Security No.

IT IS HEREBY AGREED AS FOLLOWS:

(Use space below and additional bond sheets. Set forth service to be rendered, amount to be paid, manner of payment, time for performance or completion, determination of satisfactory performance and cause for termination, other terms and conditions, and attach plans, specifications, and addenda, if any.)

Pursuant to the San Bernardino International Airport Authority Commission Action on June 25, 2003, Section 3 of Contract 00-787 is amended as follows:

The County shall pay the Contractor and the Contractor agrees to accept the following base hourly wage rate as compensation for labor or services rendered ("Salary").

- i) Commencing June 28, 2003, the Contractor shall receive **\$14.80** per hour as Salary. The Salary as set forth shall remain in effect until such time, if any, this employment contract is duly modified by the parties.

All other terms and conditions of the employment contract remain the same.

COUNTY OF SAN BERNARDINO

►
Dennis Hansberger, Chairman, Board of Supervisors

Dated: _____

SIGNED AND CERTIFIED THAT A COPY OF THIS
DOCUMENT HAS BEEN DELIVERED TO THE
CHAIRMAN OF THE BOARD

Clerk of the Board of Supervisors
of the County of San Bernardino.

By _____
Deputy

(Print or type name of corporation, company, contractor, etc.)

By ►
(Authorized signature - sign in blue ink)

Name Robert Scanu
(Print or type name of person signing contract)

Title Lead Facilities Maintenance Employee
(Print or Type)

Dated: _____

Address: ON FILE

Approved as to Legal Form

►
County Counsel

Date _____

Reviewed by Contract Compliance

►

Date _____

Reviewed for Processing

►
Agency Administrator/CAO

Date _____

